STATE OF NEW HAMPSHIRE

2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

PLEASE PRINT

JUL 24 2017

I. Name of Lobbyist((s) Kayla Montogor	mery		
II. Name of lobbyist'	DEPARTMENT OF STA			
	ood New Hampshire			
(Na	me of partnership, firm o	r corporation)		
18 Low Ave		Concord	NH	03301
Business Address: (St	reet)	(Town/City)	(State)	(Zip Code)
(603) 674-8372	()		gomery@ppnne.org
(Telephone)		(Fax)		
			ts for each client, OR you ma	y file a separate report for
reportable expense t	ransactions which ar	e not attributable t	o any one chent).	
☑ All reportable tran	nsactions occurring in	the months prior to	the reporting date relative to the	e following client:
Planned Parentho	od NH Action Fund			
Flamed Falentino		as it appears on the Lo	bbyist Registration Form)	
<u>OR</u>				
☐ All reportable tranunrelated to any partic		st (including the lob	byist's family), or the lobbying	firm listed below which are
IV. Date of Report	April 26, 2017		July 26, 2017 🕏	
Reports cover: activ	vity from date of registra		activity from 4/1/17 to 6/30/17	
	October 25, 2017 activity from 7/1/17 to 9		January 31, 2018] activity from 10/1/17 to 12/31/	17
V. There have been If this box is checked, Concord, NH 03301.	n no fees received a complete just this form	nd no reportable n and submit it to th	transactions made since the Secretary of State's Office, St	ne last report. tate House, Room 204,
VI. Check if addition	ıal reports are attach	ed:		
If you have receive	ved fees or made expen	nditures, you must fi	le Addendum A- Fees and Ex	penses
Expense Reimbursem	ent		u must file Addendum B – Rep	
☐ If you, your firm,	or your family has ma	ide political contribi	ations, you must file Addendu	m C- Political Contributions
I have read RSA 15, I and complete to the beautiful (Signature of lobbyis	est of my knowledge a Manfy an t)	and RSA 664 and he	ereby swear or affirm that the found in the	oregoing information is true
(Print Name of Johny	gomery			

P L E A S E P R I N T

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

II. Name of lobbyist's partnership, firm or corporation, if any:	
Planned Parenthood New Hampshire Action Fund (Name of partnership, firm or corporation)	· · · · · · · · · · · · · · · · · · ·
III. Name of Client	Date
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The greeduced by any expenses:	t relations, or public relations services
a) Total of all fees received in this reporting period	a) \$1,368.00 (prorate salary/hou
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year).	b) \$ <u>2.816.00</u> ear)
c) Total of all fees received to date (Add lines a and b)	c) \$4,184.00
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reffees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if expenditures are made by may be filed for the lobbyist(s)/firm. e aggregate total of all expenses paid expenses; (b) the aggregate total of all le: meals purchased during a business sess than \$10 that is given to the person ed with a value of \$25.00 or less); and orting period of greater than \$25.00 for ue of greater than \$25, purchase of a er than \$25, but not greater than \$50, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$0
c) Total of all itemized expenditures reported in detail in section VI.	c) \$

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$0
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$0
f) Total of all expenses year to date	f) \$0
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from le period, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
Ceule M. Mantyan	July 24, 2017
(Signature of lobbyist)	(Date)
(Print Name of lobbyist)	